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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Gillian | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's license or passport | Brown-Myers | |
| | licerise of passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | | |
| | | Last name | Last name |
| | | First name | First name |
| | | riistriane | i iist iidine |
| | | Middle name | Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX7340 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer | 9 xx - xx- | 9 xx - xx- |
| | Identification number (ITIN) | | |

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| Debtor 1 Gillian First Name | Brown-Myers Middle Name Last Name | Case number (if known) |
|--|---|--|
| | | |
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | | If Debtor 2 lives at a different address: |
| | 5516 W. Washington Blvd. Number Street Apt. 110 | Number Street |
| | Chicago Illinois 60644 | |
| | City State Zip Code Cook | City State Zip Code |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | | |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 2: **Tell the Court About Your Bankruptcy Case** 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for **Bankruptcy Code you** Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for fee more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ✓ No. bankruptcy within the last 8 years? Yes. District MM / DD / YYYY When District District Case number __ MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Relationship to you ___ Yes. Debtor spouse who is not When Case number, if known filing this case with MM / DD / YYYY you, or by a business Relationship to you _ partner, or by an Case number, if known affiliate? MM / DD / YYYY 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? $\overline{\mathbf{v}}$ No. I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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| Pa | rt 5: Explain Your Effor | rts to Receive a Brie | fing About Credit Counseling | | | | |
|-----------------------------------|---|--|---|--|---|---|--|
| | | About Debtor 1: | | Ab | out Debtor 2 (Sp | oouse Only in a Joint Case): | |
| 15. | Tell the court | You must check one: | | Yo | u must check one: | | |
| | whether you have received briefing about credit counseling. | counseling agen | ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I aptcy petition, and I received a ampletion. | |
| | The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | the certificate and the payment plan, eveloped with the agency. | |
| ak cc fil Yo ch fo | about credit counseling before you file for bankruptcy. You must truthfully | counseling agen | ing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a mpletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion. | |
| | check one of the following choices. If you cannot do so, you are not eligible to file. | | er you file this bankruptcy petition, opy of the certificate and payment | | | er you file this bankruptcy petition, copy of the certificate and payment | |
| | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the | | from an approve obtain those se made my reques | ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the | |
| CI | creditors can begin collection activities again. | an begin To ask for a 30-d activities requirement, atta efforts you made unable to obtain i | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this | | requirement, atta- efforts you made unable to obtain i | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this | |
| | | with your reasons | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. | | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. | | |
| | | receive a briefing must file a certifica with a copy of the | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | receive a briefing must file a certifica with a copy of the | | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. o, your case may be dismissed. | |
| | | | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | | |
| | | I am not required counseling beca | d to receive a briefing about credit ause of: | I am not required to receive a briefing about cre counseling because of: | | | |
| | | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | |
| | | | I am currently on active military duty in a military combat zone. | | | I am currently on active military duty in a military combat zone. | |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for ounseling with the court. | | about credit cour | are not required to receive a briefing seling, you must file a motion for ounseling with the court. | |

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Gillian Brown-Myers Signature of Debtor 1 Signature of Debtor 2 Executed on 7/17/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Gillian | | Brown-Myers | Case number | r (ifknown) |
|--|----------------------------|----------------------------|--------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12, or 1 | 3 of title 11, Uni | I have informed the debtor(s) about ited States Code, and have explained the I also certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | red by 11 U.S.C. § 342(b |) and, in a case i | n which § 707(b)(4)(D) applies, certify that I |
| represented by an | . , | | • | edules filed with the petition is incorrect. |
| attorney, you do not | 4.5 | | | · |
| need to file this page. | /s/ Corey A. Walters | | Date | 7/17/2017 |
| | Signature of Attorney fo | r Debtor | | MM / DD / YYYY |
| | | | | |
| | | | | |
| | Corey A. Walters | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 10 N. Martingale Road | | | |
| | Street | | | |
| | Suite 400 | | | |
| | | | | |
| | Schaumburg | Illin | | 60173 |
| | City | Sta | te | Zip Code |
| | Contact phone | | Farail adduses | |
| | Contact phone | | Email address | cwalters@semradlaw.com |
| | | | Illin | ois |
| | Bar number | | Stat | |

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| Fill in this infor | mation to identify your ca | ase: | |
|------------------------|----------------------------|-------------|----------------------|
| Debtor 1 | Gillian | | Brown-Myers |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filir | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | * 0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$4,950.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$4,950.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$815.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Ψ010.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$34,025.00 |
| Your total liabilities | \$34,840.00 |
| art 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | |
| Copy your combined monthly income from line 12 of Schedule I | \$2,851.76 |
| | |

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Debtor 1 Gillian Brown-Myers __ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$868.89 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$6,882.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$6,882.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information to identify your | case: | | | | |
|--|--|---|--|------------------------------------|--|--|
| | | | D M | | | |
| Debtor 1 | Gillian First Name | Middle Nar | Brown-Myers ne Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fi | ling) First Name | Middle Nar | ne Last Name | | | |
| United Sta | ates Bankruptcy Court for the | e: Northern | District of Illinois (State) | | | |
| Case num (If known) | nber | | | | | _ |
| Officia | al Form 106A/B | | | | | Check if this is an amended filing |
| Sche | dule A/B: Prop | erty | | | | 12/1 |
| category v responsibl write your | where you think it fits best le for supplying correct info name and case number (i | . Be as complete and ormation. If more spa f known). Answer eve | an asset only once. If an asset accurate as possible. If two m ce is needed, attach a separat ry question. I, or Other Real Estate You | arried people a e sheet to this | re filing together, both a form. On the top of any a | re equally |
| 1. Do you | ı own or have any legal or | equitable interest in | any residence, building, land, o | or similar prope | rty? | |
| ~ | No. Go to Part 2 | | | | | |
| | Yes. Where is the property? | | | | | |
| | | , | What is the property? Check all | that apply. | | claims or exemptions. Put |
| 1.1 | Street address, if available, or | or other description | Single-family home | | | red claims on Schedule D: nims Secured by Property. |
| | , | | Duplex or multi-unit building | | Current value of the | Current value of the |
| | | | Condominium or cooperative | _ | entire property? | portion you own? |
| | | | Manufactured or mobile home |) | | |
| | Number Street | | Investment property | | Describe the nature o | |
| | | | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City State | Zip Code | Other | | | —————————————————————————————————————— |
| | | | ── Who has an interest in the propone. | erty? Check | Check if this is co (see instructions) | mmunity property |
| | | | Debtor 1 only | | | |
| | | | Debtor 2 only | | | |
| | | | Debtor 1 and Debtor 2 only | | | |
| | | | At least one of the debtors and | d another | | |
| | | | Other information you wish to a | | tem, such as local | |
| | | | property identification number: | | | |
| if you | own or have more than one | | What is the property? Check all | that apply | Do not deduct secured | claims or exemptions. Put |
| 1.2 | - | | Single-family home | а. арр.у. | the amount of any secu | red claims on Schedule D: |
| | Street address, if available, of | or other description | Duplex or multi-unit building | | Creditors Who Have Cla | ims Secured by Property. |
| | - | | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | Manufactured or mobile home | e | | |
| | Number Street | | Land | | Describe the nature o | f vour ownership |
| | | | Investment property | | interest (such as fee s | simple, tenancy by |
| | City State | Zip Code | Timeshare Other | | the entireties, or a life | e estate), if known. |
| | | | | | Check if this is co | mmunity property |
| | | | Who has an interest in the prop | erty? Check | (see instructions) | |
| | | i | one. Debtor 1 only | | | |
| | | | Debtor 2 only | | | |
| | | | Debtor 1 and Debtor 2 only | | | |
| | | | At least one of the debtors and | d another | | |
| | | | — Other information you wish to a | | em, such as local | |
| | | | property identification number: | | , 04011 45 10041 | |

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| | Gillian | | | e number (| (if known) | |
|--|--|---|---|---|---|---|
| | First Name | Middle Name | Last Name | | | |
| 1.3 | eet address, if available, or ot | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | t (| the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nu | mber Street y State | Zip Code | Land Investment property Timeshare Other | i | Describe the nature of interest (such as fee s the entireties, or a life | imple, tenancy by e estate), if known. |
| | | [[[| Who has an interest in the property? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this property identification number: | [| (see instructions) | illing property |
| 2. Add | I the dollar value of the po | • | all of your entries from Part 1, including any | y entries | for pages | |
| you ha | ave attached for Part 1. W | rite that number h | uere. | | | |
| | | | | | | |
| Do you ov you own to 3. Cars, vo | that someone else drives. If ans, trucks, tractors, sport u o | equitable interest you lease a vehicle, | t in any vehicles, whether they are registere also report it on Schedule G: Executory Contrac rcycles | | • | |
| Do you ov you own to 3. Cars, va | wn, lease, or have legal or that someone else drives. If ans, trucks, tractors, sport u o | equitable interest you lease a vehicle, | also report it on Schedule G: Executory Contractorycles Who has an interest in the property? Chone. | acts and U | Do not deduct secured the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| Do you ov you own to 3. Cars, vo \textsquare No \textsquare Ye | wn, lease, or have legal or that someone else drives. If ans, trucks, tractors, sport u o es Make Model: | equitable interest you lease a vehicle, tility vehicles, motor | also report it on Schedule G: Executory Contractorycles Who has an interest in the property? Ch | acts and U | Do not deduct secured the amount of any secu | ured claims on Schedule D: |
| Do you ov you own to 3. Cars, vo \textsquare No \textsquare Ye | wn, lease, or have legal or that someone else drives. If ans, trucks, tractors, sport urbes Make Model: Year: Approximate mileage: Other information: | equitable interest you lease a vehicle, tility vehicles, motor Chrysler Sebring 2005 | who has an interest in the property? Chone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property | acts and U | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| Do you ov you own to 3. Cars, vo No Y Ye 3.1 | wn, lease, or have legal or that someone else drives. If ans, trucks, tractors, sport urbes Make Model: Year: Approximate mileage: Other information: | equitable interest you lease a vehicle, tility vehicles, motor Chrysler Sebring 2005 | who has an interest in the property? Chone. Debtor 1 only Debtor 2 only At least one of the debtors and another | acts and Un Check er y (see Check | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? \$2325.00 | ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |

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| | Gillian | | | ımber <i>(if known</i>) | | | |
|----------|--|-------------------|--|---|---|--|--|
| | First Name | Middle Name | Last Name | | | | |
| 3.3 | Make Model: Year: | | Who has an interest in the property? Checone. Debtor 1 only | the amount of any secu | claims or exemptions. Pured claims on Schedule aims Secured by Property | | |
| | Approximate mileage: | | Debtor 2 only | Current value of the | Current value of the | | |
| | Other information: | | Debtor 1 and Debtor 2 only | entire property? | portion you own? | | |
| | | | At least one of the debtors and another | | | | |
| | | | Check if this is community property (so instructions) | ee | | | |
| Year | Make | | Who has an interest in the property? Chec | | cured claims or exemptions. Pu | | |
| | Model: | | one. | | the amount of any secured claims on Schedu Creditors Who Have Claims Secured by Prope | | |
| | Year: Approximate mileage: | | Debtor 1 only | Creditors with mave Cit | aims Secured by Propert | | |
| | Approximate mileage. | | Debtor 2 only | Current value of the | Current value of the | | |
| | Other information: | | Debtor 1 and Debtor 2 only | entire property? | portion you own? | | |
| | | | At least one of the debtors and another | | | | |
| | | | Check if this is community property (se instructions) | ee | | | |
| | No Yes | order waterorart, | fishing vessels, snowmobiles, motorcycle acces | ssories | | | |
| | Yes Make | osona wateroran, | Who has an interest in the property? Chec | ck Do not deduct secured | | | |
| ✓ | Yes | | Who has an interest in the property? Checone. | ck Do not deduct secured the amount of any secu | ured claims on <i>Schedule</i> | | |
| ✓ | Yes Make Model: | | Who has an interest in the property? Checone. Debtor 1 only | Do not deduct secured the amount of any secu Creditors Who Have Cla | ured claims on <i>Schedule</i> aims Secured by Propen | | |
| ✓ | Yes Make Model: Year: Approximate mileage: | | Who has an interest in the property? Checone. | ck Do not deduct secured the amount of any secu | ured claims on <i>Schedule</i> | | |
| ✓ | Yes Make Model: Year: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only | Do not deduct secured the amount of any secundary with the control of the control | ured claims on Schedule aims Secured by Propert Current value of the | | |
| ✓ | Yes Make Model: Year: Approximate mileage: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured the amount of any secureditors Who Have Claurent value of the entire property? | ured claims on Schedule aims Secured by Propen Current value of the | | |
| 4.1 | Yes Make Model: Year: Approximate mileage: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured the amount of any secureditors Who Have Classification Current value of the entire property? | ured claims on Schedule aims Secured by Propen Current value of the portion you own? | | |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) | ck Do not deduct secured the amount of any secured treatment of the entire property? ee Do not deduct secured the amount of any secured the amount | claims or Schedule of the portion you own? | | |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) Who has an interest in the property? Checon | ck Do not deduct secured the amount of any secured treatment of the entire property? ee Do not deduct secured the amount of any secured the amount | claims or Schedule of the portion you own? | | |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) Who has an interest in the property? Checone. | ck Do not deduct secured the amount of any secured treatment of the entire property? ee Do not deduct secured the amount of any secured the amount | claims or exemptions. It is claims Secured by Propertion you own? claims or exemptions. It is claims or exemptions. It is claims on Schedule aims Secured by Propertions. It is claims of the Current value of the | | |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) Who has an interest in the property? Checone. Debtor 1 only | ck Do not deduct secured the amount of any secured the amount of any secured the entire property? Do not deduct secured the amount of any secured t | claims on Schedule aims Secured by Propen Current value of the portion you own? claims or exemptions. If ured claims on Schedule aims Secured by Propen | | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (se instructions) Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only | Current value of the amount of any sectored to the amount of any sectored to the entire property? Do not deduct secured the amount of any sectored the amount of any sectored to the current value of the Current value of the | claims or exemptions. It is claims Secured by Propertion you own? claims or exemptions. It is claims or exemptions. It is claims on Schedule aims Secured by Propertions. It is claims of the Current value of the | | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured the amount of any secured treatment value of the entire property? Do not deduct secured the amount of any secured treatment value of the entire property? Current value of the entire property? | claims or exemptions. Fured claims on Schedule aims Secured by Propert | | |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) Who has an interest in the property? Checone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (seinstructions) | ck Do not deduct secured the amount of any secured the amount of any secured the entire property? The ee The property of the entire property of the amount of any secured the amount of any secured the amount of the entire property? The ee The property of the entire proper | ured claims on Schedule aims Secured by Propert Current value of the portion you own? claims or exemptions. Fured claims on Schedule aims Secured by Propert Current value of the | | |

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used furniture \$600.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used electronics (TV's, Tablets, Laptop, play station) \$900.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1900.00 for Part 3. Write that number here

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$0.00 17.1. Checking account: TCF 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb ⁻ | tor 1 Gillian First Name | Middle Name | Brown-Myers Last Name | Case number (if known) | |
|------------------|---|---|----------------------------------|---------------------------------------|----------|
| 20. | Government and corp | orate bonds and other negotial include personal checks, cashiers | ele and non-negotiable inst | | |
| | | ents are those you cannot transfer | | | |
| | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | |
| | | | | | |
| 21. | Retirement or pension | | | | |
| | Examples: Interests in IF | RA, ERISA, Keogh, 401(k), 403(b) | , thrift savings accounts, or o | other pension or profit-sharing plans | |
| | ✓ No | | | | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | | | |
| | | Pension plan: | | | <u> </u> |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | - |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | No | | Institution name: | | |
| | ✓ Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | With Landlord | | \$725.00 |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for a nu | imber of years) | |
| | ✓ No | | | | |
| | Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | <u> </u> |

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| Debto | or 1 Gillian | Brown-Myers Case number | (if known) | |
|-------|---|--|--|--|
| | First Name | Middle Name Last Name | | |
| 24. | | an education IRA, in an account in a qualified ABLE program, or under a qualified states 530(b)(1), 529A(b), and 529(b)(1). | ite tuition program. | |
| | ✓ No Yes | Institution name and description. Separately file the records of any interests.11 U.S.C. § 52 | 21(c): | |
| | | | | |
| | | | | |
| 25. | | table or future interests in property (other than anything listed in line 1), and rights o for your benefit | r powers | |
| | ✓ No Yes. Desc | cribe | | |
| 26. | | pyrights, trademarks, trade secrets, and other intellectual property ternet domain names, websites, proceeds from royalties and licensing agreements | | |
| | ✓ No | | | |
| | Yes. Desc | cribe | | |
| 27. | | anchises, and other general intangibles uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, profession | onal licenses | |
| | ✓ No | | | |
| | Yes. Desc | cribe | | |
| | | | | |
| | | | | |
| Mon | ey or propei | erty owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or propei | | | portion you own? |
| | | | | portion you own? Do not deduct secured |
| | Tax refunds on No Yes. Give | owed to you specific information | Federal: | portion you own? Do not deduct secured |
| | Tax refunds or No Yes. Give sabou | specific information ut them, including whether already filed the returns | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give sabou | specific information ut them, including whether already filed the returns the tax years | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds or No Yes. Give about your and it | specific information ut them, including whether already filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: nt, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: nt, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: Int, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | State: Local: Int, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | State: Local: Int, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | State: Local: Int, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds or No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | State: Local: Int, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| State Stat | |
|--|--|
| Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No | |
| Yes. Name the insurance company of each policy and list its value Seneficiary: | |
| If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No | Surrender or refund value |
| Examples: Accidents, employment disputes, insurance claims, or rights to sue Ves. Describe 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe No | |
| to set off claims No Yes. Describe 35. Any financial assets you did not already list No | |
| ✓ No | |
| | |
| | |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | \$725.00 |
| Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. Do you own or have any legal or equitable interest in any business-related property? | |
| Yes. Go to line 38. | rent value of the tion you own? not deduct secured claims xemptions |
| 38. Accounts receivable or commissions you already earned | |
| Yes. Describe | |
| 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic | ic devices |
| ✓ No Yes. Describe | |

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| Deb | tor 1 Gillian | Brown-Myers | Case number (if known) | |
|--------|--------------------------------|---|---------------------------|------------------------------|
| | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, e | quipment, supplies you use in business, and tools of your trade | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| | | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |
| 42. | Interests in partnersh | ips or joint ventures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | - |
| | | <u> </u> | | <u> </u> |
| | | | | |
| 43. (| Customer lists, mailing | lists, or other compilations | | - |
| | No No | | | |
| | <u> </u> | | 04/44 8\\0 | |
| | Yes. Do your lists if | nclude personally identifiable information (as defined in 11 U.S.C. § 1 | 01(41A))? | |
| | No | | | |
| | Yes. Desc | ribe | | |
| | | | | |
| 44. | Any business-related | property you did not already list | | |
| | ✓ No | | | |
| | $\stackrel{\smile}{=}$ | | | |
| | Yes. Give specific information | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| | | all of your entries from Part 5, including any entries for pages yo | | |
| for Pa | art 5. Write that numbe | er here | | |
| | Describe Δny Fa | arm- and Commercial Fishing-Related Property You Ov | wn or Have an Interest In | |
| Part | If you own or have an | interest in farmland, list it in Part 1. | or ridge an interest in: | |
| 46. | | ny legal or equitable interest in any farm- or commercial fishing | related property? | |
| 40. | Do you own or have a | ny legal of equitable interest in any larin- of commercial listing | g-related property: | Current value of the |
| | No. Go to Part 7. | | | portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims |
| | _ | | | or exemptions |
| 47. | Farm animals | outhy form roland fish | | |
| | Examples: Livestock, p | ountry, ramin-raiseu fism | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |

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| Deb | | Brown-Myers | Case number (if known) | |
|--------------|--|-------------------------|------------------------------|-------------|
| | | Last Name | | |
| 48. | Crops-either growing or harvested | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| 10 | Farm and fishing equipment, implements, machinery, fixtur | as and tools of trado | | |
| 45. | | es, and tools of trade | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 50. | Farm and fishing supplies, chemicals, and feed | | | |
| | No No | | | |
| | Yes. Describe | | | |
| | Too. Bosonbe | | | |
| | | | | |
| 51. | Any farm- and commercial fishing-related property you did | not already list | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | Г | |
| 52. A | dd the dollar value of all of your entries from Part 6, includin | g any entries for pages | you have attached | |
| for Pa | art 6. Write that number here | | | |
| | | | | |
| | | | | |
| | Describe All Describe Very Over an Heavy and International | 1 ! Th -1 V D!-! A | Lat Lint Alexan | |
| Part | | | NOT LIST ADOVE | |
| 53. | Do you have other property of any kind you did not already be Examples: Season tickets, country club membership | list? | | |
| | ✓ No | | | |
| | | | | |
| | Yes. Give specific information | | | |
| | | | | |
| | | | | - |
| -4 4 | dd the deller relice of all of recovery antice from Deat 7. Write th | -4 | | |
| 54. A | dd the dollar value of all of your entries from Part 7. Write th | at number nere | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Part | 8: List the Totals of Each Part of this Form | | | |
| | | | | |
| 55.1 | Part 1: Total real estate, line 2 | | ······ | |
| 56 1 | part 2 total vehicles, line 5 | | | |
| | | \$2325.00 | - | |
| 57. F | Part 3: Total personal and household items, line 15 | \$1900.00 | <u>.</u> | |
| 58. F | Part 4: Total financial assets, line 36 | \$725.00 | | |
| 59. I | Part 5: Total business-related property, line 45 | | - | |
| 60 1 | Part 6: Total farm- and fishing-related property, line 52 | | - | |
| | | | - | |
| 61. I | Part 7: Total other property not listed, line 54 | | <u>-</u> | |
| 62. | Total personal property. Add lines 56 through 61 | \$4950.00 | | + \$4950.00 |
| | | | Copy personal property total | |
| | | | | \$4950.00 |
| 63. T | otal of all property on Schedule A/B. Add line 55 + line 62 | | | <u> </u> |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|----------|--|
| Debtor 1 | Gillian | | Brown-Myers | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | <u> </u> | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (Citato) | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Part 1: Identify the Property You Claim as Exempt | | | | | |
|----|--|--|---|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | |
| | Brief description: Chrysler Sebring, 2005, 2005 Chrysler Sebring Line from Schedule A/B: 03 | \$2,325.00 | \$1,510.00; \$0.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | |
| | Brief description: Used furniture Line from Schedule A/B: 06 | \$600.00 | \$600.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| 3. | ✓ No | ry 3 years after that for o | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | |

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Debtor 1 Gillian Brown-Myers Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$400.00 description: **✓** \$400.00 Used clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$900.00 description: **✓** \$900.00 Used electronics (TV's, 100% of fair market value, up to any Tablets, Laptop, play station) applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief description: \$0.00 **✓** \$0 Checking account, TCF 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 17 Brief 735 ILCS 5/12-1001(b) \$725.00 description: \$725.00 Security deposit on 100% of fair market value, up to any rental unit, With applicable statutory limit Landlord

Line from Schedule A/B:

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| | | | DC | ocument Page 22 of | 69 | | |
|-------------------|--|--|---|---|---|---|---------------------------------------|
| Fill in t | this inforr | nation to identify your ca | se: | | | | |
| Debto | r 1 | Gillian First Name | Middle Name | Brown-Myers Last Name | | | |
| Debtoi (Spouse | r 2 e, if filing) | First Name | Middle Name | Last Name | | | |
| United | States B | ankruptcy Court for the: | Northern | District of Illinois | | | |
| Case r | number n) | | | (State) | | | |
| Offi | cial | Form 106D | | | J | | Check if this is an amended filing |
| Sch | nedu | le D: Credito | ors Who Ha | ve Claims Secure | ed by Prop | ertv | 12/15 |
| | No. C | number (if known). reditors have claims see Check this box and submodeling all of the information All Secured Claims | nit this form to the court | rty? with your other schedules. You hav | ve nothing else to repo | ort on this form. | |
| 2. | List all s | y for each claim. If more th | nan one creditor has a pa | cured claim, list the creditor rticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| | Chicago City Who ow Deb Deb At leand Che | Addison St or Street State ZIP Code | Chrysler Sebring Value As of the date you file Contingent Unliquidated Disputed Nature of lien. Check An agreement you car loan) Statutory lien (such Judgment lien from Other (including a research) | all that apply. all that apply. made (such as mortgage or secured as tax lien, mechanic's lien) n a lawsuit right to offset) | \$815.00 | \$2,325.00 | \$0.00 |
| | incurred | | Last 4 digits of accou | Int number | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$815.00

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| еч . | | and the state of the state of | | | | | | |
|--|--|--|---|--|---|--|---|--|
| HIIII | in this intor | mation to identify your c | ase: | | | | | |
| Deb | tor 1 | Gillian | | Brown-Myers | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ted States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Cas (If knd | e number own) | - | | . , | — | | | |
| Off | ficial F | orm 106E/F | | | <u></u> | Che | ck if this is an | amended filing |
| Sc | chedu | ule E/F: Cre | editors Who | Have Unse | cured Claims | | | 12/15 |
| othe Form clain the e knov | r party to a n 106A/B) a ns that are entries in t vn). | any executory contracts and on <i>Schedule G: Exe</i> e listed in <i>Schedule D: C</i> he boxes on the left. At | s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims | could result in a claim. expired Leases (Official I Secured by Property. If | s and Part 2 for creditors wit Also list executory contracts Form 106G). Do not include a more space is needed, copy cop of any additional pages, w | on <i>Schedu</i> ny creditor the Part yo | ule A/B: Prop s with partia ou need, fill i | perty (Official ally secured t out, number |
| 1. | | reditors have priority un Go to Part 2. | secured claims against yo | ou? | | | | |
| 2. | listed, ider As much a Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priority | y and nonpriority amounts ling to the creditor's name particular claim, list the oth | | both priority | and nonprior | rity amounts. |
| | | | | | | Total | Priority | Nonpriority |

claim

amount

amount

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 American Financial Choice \$250.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 570 W Roosevelt Rd Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60607 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ unsecured Is the claim subject to offset? Yes 4.2 Americash - Bankruptcy \$400.00 Last 4 digits of account number Nonpriority Creditor's Name Mkt Square Shop Ctr 180 S Bolingbrook Dr When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60440 Bolingbrook Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ unsecured Is the claim subject to offset? **✓** No Yes ARMOR SYSTEMS CO 4.3 \$30.00 Last 4 digits of account number 1318 Nonpriority Creditor's Name When was the debt incurred? 1700 KIEFER DR STE 1 10/2016 Number As of the date you file, the claim is: Check all that apply. Contingent ZION 60099 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? ✓ ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes

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Debtor 1 Gillian Brown-Myers Case number (if known) Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | Page | |
|--------|---|--|-------------|
| | After listing any entries on this page, number them beginning wit | h 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | CAPITALONE Nonpriority Creditor's Name PO BOX 26625 Number Street | Last 4 digits of account number 6698 When was the debt incurred? 10/2016 As of the date you file, the claim is: Check all that apply. | \$449.00 |
| | RICHMOND Virginia 23261 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard | |
| 4.5 | CashNet USA Nonpriority Creditor's Name 175 West Jackson, Ste 1000 Number Street Chicago Illinois 60604 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | Last 4 digits of account number When was the debt incurred? | \$500.00 |
| 4.6 | CB/AVENUE Nonpriority Creditor's Name PO BOX 182789 Number Street COLUMBUS Ohio 43218 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | Last 4 digits of account number 2740 When was the debt incurred? 2/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard | \$0.00 |

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Debtor 1 Gillian Brown-Myers Case number (if known)
First Name Middle Name Last Name

| Part : | Your NONPRIORITY Unsecured Claims - Continuation | on Page | |
|--------|---|--|-------------|
| | After listing any entries on this page, number them beginning v | vith 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | Commonwealth Edison Nonpriority Creditor's Name 3 Lincoln Ctr Fl 4 Number Street | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent | \$600.00 |
| | Oakbrook Ter Illinois 60181 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify unsecured | |
| 4.8 | CONVERGENT OUTSOURCING Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 Number Street Houston Texas 77043 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 7034 When was the debt incurred? 4/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: Other. Specify COMCAST | \$667.00 |
| 4.9 | CREDIT MANAGEMENT LP Nonpriority Creditor's Name PO Box 118288 Number Street Carrollton Texas 75011 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No | — Last 4 digits of account number | \$297.00 |

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 FIRST PREMIER BANK \$536.00 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 11/2016 Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud Minnesota 56302 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes 4.11 GO FINANCIAL \$7,669.00 Last 4 digits of account number 7301 Nonpriority Creditor's Name Po Box 29018 When was the debt incurred? 12/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent Arizona 85038 Phoenix Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 031 Automobile Is the claim subject to offset? **✓** No Yes 4.12 Honor Finance \$3,865.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1817 When was the debt incurred? 2/2015 Number As of the date you file, the claim is: Check all that apply. Contingent 60204 Evanston Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ 030 Automobile

No Yes

Is the claim subject to offset?

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 IL Tollway \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Ave Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60515 Downers Grove Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ unsecured Is the claim subject to offset? **✓** No Yes Peoples Gas Light & Coke Co. \$1,500.00 4.14 Last 4 digits of account number _ Nonpriority Creditor's Name 200 E. Randolph St. When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Is the claim subject to offset? **✓** No Yes 4.15 Santander Consumer USA \$8,613.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11/2011 14101 MYFORD RD FL 2 Number Street As of the date you file, the claim is: Check all that apply. Contingent TUSTIN 92780 California Unliquidated Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify ____ 052 Automobile Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 UNIVERSITY OF PHOENIX \$867.00 Last 4 digits of account number Nonpriority Creditor's Name 4615 E ELWOOD ST FL 3 When was the debt incurred? 9/2011 Number As of the date you file, the claim is: Check all that apply. Contingent **PHOENIX** Arizona 85040 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 001 InstallmentLoan Is the claim subject to offset? **✓** No Yes 4.17 US DEPT OF ED/GLELSI \$6,882.00 Last 4 digits of account number 8581 Nonpriority Creditor's Name 2401 INTÉRNATIONAL LN When was the debt incurred? 10/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON Wisconsin 53704 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes White Hill Cash Pay day loans 4.18 \$400.00 Last 4 digits of account number Nonpriority Creditor's Name Island Finance, LLC. P.O. Box 330 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Montana 59527 Hays City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ unsecured Is the claim subject to offset?

✓ No Yes

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Debtor 1 Gillian Brown-Myers Case number (if known)

| First Nar | ne Middle Name Last Name | | | | |
|--------------------------|--|-----|--|--------------------|--|
| Part 4: Add th | e Amounts for Each Type of Unsecured Claim | | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | | tatistical reporting purposes only Total claims | y. 28 U.S.C. §159. | |
| | | | | | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | | |
| | | | Total claims | | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$6,882.00 | | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$27,143.00 | | |
| | 6j. Total. Add lines 6f through 6j. | 6i. | \$34,025.00 | | |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|
| Debtor 1 | Gillian | | Brown-Myers | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | () | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or com | pany with whom you have | the contract or lease | State what the contract or lease is for |
|-----|--|-------------------------|-----------------------|--|
| 2.1 | Urban Alternativ Name 5934 W North A | | | Residential Lease, Debtor is Lessee, Monthly Lease |
| | Number | Street | | |
| | Chicago | Illinois | 60639 | |
| | City | State | Zip Code | |

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| | | | Do | cument rage c | 02 01 03 |
|------------|--------------------------|---------------------------|--------------------------------|--|---|
| Fill i | n this infor | mation to identify your o | ase: | | |
| Deb | tor 1 | Gillian | | Brown-Myers | |
| | | First Name | Middle Name | Last Name | |
| | tor 2 use, if filing) | First Name | Middle Name | Last Name | |
| (- | , | riistivaine | Middle Name | | |
| Unit | ed States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case | e number | | | (State) | |
| (If kno | own) | | | | |
| | | | | | Check if this is an amended filing |
| ∩ f | ficial | Form 106H | | | anonce imig |
| <u> </u> | IICIAI | 1 01111 10011 | | | |
| Sc | hedul | e H: Your Cod | lebtors | | 12/15 |
| Cada | htoro oro | | ava alaa liabla fay awy dal | ata way may haya. Ba aa a | emplete and accurate as possible. If two married people are |
| the e | ntries in t | | | | ice is needed, copy the Additional Page, fill it out, and number if any Additional Pages, write your name and case number (if |
| 1. | Do you ha | ve any codebtors? (If yo | ou are filing a joint case, do | not list either spouse as a co | odebtor.) |
| | ✓ No | | | | |
| | Yes | | | | |
| | | | | perty state or territory? (Cashington, and Wisconsin.) | Community property states and territories include Arizona, California, |
| | No. | Go to line 3. | | | |
| | Yes. | Did your spouse, forme | er spouse, or legal equiva | lent live with you at the tim | e? |
| | | No | | | |
| | | Yes. In which communit | y state or territory did you | ı live? | Fill in the name and current address of that person. |
| | | | | | <u></u> |
| | | Name of your spouse, f | ormer spouse, or legal equ | valent | |
| | | Number Street | | | <u> </u> |
| | | | | | <u></u> |
| | | City | State | Zip Code | |
| 3. | In Column | 1, list all of your codel | otors. Do not include you | spouse as a codebtor if y | our spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| Debtor 1 Gillian Brown-Myers Debtor 2 Gillian Brown-Myers Debtor 3 Gillian Brown-Myers Debtor 4 Gillian Brown-Myers Debtor 5 Gillian Brown-Myers Debtor 6 Gillian Brown-Myers Debtor 7 Gillian Brown-Myers Debtor 8 Gillian Brown-Myers Debtor 9 Gillian Brown-Myers Debtor 9 Gillian Brown-Myers Debtor 9 Gillian Brown-Myers Debtor 1 Gillian Brown-Myers Debtor 2 Gillian Brown-Myers Debtor 3 Gillian Brown-Myers Debtor 4 Gillian Brown-Myers Debtor 5 Gillian Brown-Myers Debtor 6 Gillian Brown-Myers Debtor 7 Gillian Brown-Myers Debtor 8 Gillian Brown-Myers Debtor 9 Gillian Brown-Myers Debtor 9 Gillian Brown-Myers Debtor 1 Gillian Brown-Myers Debtor 1 Gillian Brown-Myers Debtor 1 Gillian Brown-Myers Debtor 1 Debtor 2 Gillian Brown-Myers Debtor 3 Debtor 4 Gillian Brown-Myers Debtor 4 Debtor 5 Gillian Brown-Myers Debtor 5 Gillian Brown-Myers Debtor 6 Gillian Brown-Myers Debtor 7 Debtor 7 Gillian Brown-Myers Debtor 8 Gillian Brown-Myers Debtor 9 G | Elli in Alain in | .f | | | | | | | | |
|---|---|---|--|-----------------|------------|----------------------|------------------|---------------------------|----------|-------------------|
| Pirst Name | FIII IN THIS IN | itormation to identity | your case: | | | | | | | |
| Debtor 2 Souse, if fillings First Name Middle Name Last Name United States Bankruptoy Court for the: | Debtor 1 | | | | _ | | = | | | |
| United States Bankruptcy Court for Northern District of Illinois the Principle of Principle States Bankruptcy Court for Northern District of Illinois (State) Case number As amended Illing As supplement showing post-pellition chapter 15 expenses as of the following date: MM / DD / YYYY | Dobtos 0 | First Name | Middle Name | Last N | lame | • | Che | eck if this is: | | |
| Official Form 106l Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing ipinity, and your spouse is living with you, include information information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separated sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment If you have more than one job, altoch a separate page with information about additional employers. Occupation If you have more than one job, altoch a separate page with information about additional employers. Occupation may include student or homenaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separate detect to this form. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated select to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse. List monthly gross wages, salary, and commissions (before all payrol! 2. \$1.262.56 Children in the page would be. States and list monthly overtime pay. 3. +80.00 | | g) First Name | Middle Name | Last N | lame | | - I 🗖 | An amended filing | | |
| Case number of known) Official Form 106I Schedule I: Your Income 12/16 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing biority, and your spouse is living with you, include information about your spouse. If you are separated and your spouse so it filing with you, do not include information about your spouse is needed, attach a separated sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information about additional employers. Part 2: Give Details About Monthly Income Employer's name Employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated sheet to this form. Part 2: List monthly gross wages, salary, and commissions (before all payor) 2. List monthly gross wages, salary, and commissions (before all payor) 2. Statistate and list monthly overtime pay. 3 | United States | Bankruntov Court for | Northern | District of III | inoie | | | A supplement showing | post-pe | tition chapter 13 |
| Official Form 106l Schedule I: Your Income 12/18 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing ignitive, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separated sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment If you have more than one job, attach a separate page with information about additional employers. Debtor 1 Employed Debtor 1 Debtor 2 Employed Not Employed Not Employed Not Employed Include part time, seasonal, or sept-specially street. Suite 14:00 Employer's name Employer's address City State Zip Code The Describe Street Number Street Number Street Number Street Number Street Number Street Number Street The Describe Include your non-filing spouse unless you are separate dated to this form. If you are your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need morthly gross wages, salary, and commissions (before all payrol 2. \$1.262.56 Chis Street Include your non-filing spouse 1. For Debtor 1 For Debtor 2 or non-filing spouse Suite 14:00 | | s Dariki upicy Court ioi | Northern | _ | | | - - | expenses as of the follo | owing da | ite: |
| Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is fiving with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you readed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment Information. If you have more than one job, altach a separate spay with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's address Occupation Employer's address Occupation Employer's address Occupation Employer's address Occupation Employer's address Michaer Server Number Ser | | r | | | | | - ; | MM / DD / \\\\ | | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question. Part 1: Describe Employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, assaonal, or seff-employed work. Occupation Employer's name Employer's address Occupation Employer's address Employer's address Employer's address Occupation Employer's address Employer's address Employer's address Employer's address Employer's address Employer's address Employer's port of the detay of the special page of the page o | (II KIIOWII) | | | | | | | IVIIVI / DD / YYYY | | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part time, seasonal, or self-amployed work. Occupation may include student or homemaker, if it applies. Debtor 1 Employer's address Employer's portion about definitional employers. Bendow and the property of the propert | Official | Form 106I | | | | | | | | |
| responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employes. Occupation Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Occupation Employer's name Employer's name Employer's address Suite 1400 Fortland Oragon 97232 City State Zip Code City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 Stime Zip Code For Debtor 2 For Debtor 3 For Debtor 3 For Debtor 4 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 5 For Debtor 6 For Debtor 9 For De | Schedu | ile I: Your In | come | | | | | | | 12/15 |
| If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Cocupation Multiplicate Street Number Street Suite 1400 Portland Oregon 97232 City State Zip Code City State Zip Code How long employed there? City State Zip Code Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00 | information spouse. If m number (if k | about your spouse. I ore space is needed nown). Answer ever | f you are separated and I, attach a separate she y question. | d your spou | se is | not filing | with you, do | not include informa | tion ab | out your |
| Information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Employed MinderCare Education | 1. Fill in vo | ur emplovment | | Debtor 1 | ı | | | Debtor 2 | | |
| If you have more than one job, attach a separate page with information about additional employers. Occupation Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Number Street Number Street Number Street Number Street N | _ | | | | | | | | | |
| Include part time, seasonal, or self-employer work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | - | = | Employment status | | - | | | | | |
| Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Portland Oregon 97232 City State Zip Code City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 State 2ip Code Tity State 2ip Code Toty State 2ip Code | | | | Not E | mplo | yed | | Not Employed | | |
| Employer's address Employer's address Employer | | | Occupation | | | | | | | |
| Occupation may include student or homemaker, if it applies. Portland Oregon 97232 City State Zip Code | | | sonal, or Employer's name | | | KinderCare Education | | | | _ |
| or homemaker, if it applies. Suite 1400 Portland Oregon 97232 City State Zip Code City State Zip Code | | • | Employer's address | | | | | | | |
| Portland Oregon 97232 City State Zip Code City State Zip Code How long employed there? City State Zip Code Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. \$1,262.56 For Debtor 2 or non-filing spouse 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | | | | Number Street | | | |
| City State Zip Code City Stat | | | | Suite 140 | Suite 1400 | | | _ | | |
| City State Zip Code City Stat | | | | | | | | _ | | |
| How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3 | | | | | | | | _ | | |
| Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | City | | State | Zip Code | City | State | Zip Code |
| Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | | | | | | | |
| Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. \$1,262.56 deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00 | | | there: | | | | | | _ | |
| spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 1. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | Part 2: Gi | ve Details About N | Monthly Income | | | | | | | |
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | spouse unle | ess you are separated. or non-filing spouse have | e more than one employer, | - | | mation for a | .ll employers fo | or that person on the lin | - | |
| | deducti | | • . | | 2. | | | non-filing spouse | | |
| 4. Calculate gross income. Add line 2 + line 3. 4. \$1,262.56 | 3. Estima | te and list monthly ove | rtime pay. | | 3. | | + \$0.00 | | | |
| | 4. Calcula | ate gross income. Add l | ine 2 + line 3. | | 4. | | \$1,262.56 | | | |

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| Debto | | Brown-Myers | | er (if | |
|-----------------------|---|--------------------|-----------------------|-----------------------------------|-------------------------|
| | First Name Middle Name La | ast Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Cop | y line 4 here | → 4. | \$1,262.56 | | |
| | all payroll deductions: | | | | |
| 5a. | Tax, Medicare, and Social Security deductions | 5a | \$149.80 | | |
| 5b. | Mandatory contributions for retirement plans | 5b | \$0.00 | | |
| 5c. | Voluntary contributions for retirement plans | 5c | \$0.00 | | |
| 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. | Insurance | 5e. | \$0.00 | | |
| 5f. I | Domestic support obligations | 5f | \$0.00 | | |
| 5g. | Union dues | 5g | \$0.00 | | |
| 5h. | Other deductions. Specify: | 5h. + | \$0.00 + | - <u></u> | |
| 6. Add +5h. | the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f$ | + 5g 6 | \$149.80 | | |
| 7. Calc | culate total monthly take-home pay. Subtract line 6 from line | 4. 7 | \$1,112.76 | | |
| 8. List | all other income regularly received: | | | | |
| | Net income from rental property and from operating a business, profession, or farm | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | \$0.00 | | |
| 8b. | Interest and dividends | 8b | \$0.00 | | |
| | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 1 | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | \$0.00 | | |
| 8d. | Unemployment compensation | 8d | \$0.00 | | |
| | Social Security | 8e | \$1,645.00 | · | |
| | Other government assistance that you regularly receive include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or nousing subsidies Specify: Food Assistance Programs Income | 8f | \$94.0 <u>0</u> | | |
| 8g. | Pension or retirement income | 8g | \$0.00 | | |
| 8h. | Other monthly income. Specify: | 8h. + | \$0.00 + | - <u></u> | |
| 9. Add | all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | 8h. 9. | \$1,739.00 | | |
| | culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spe | ouse 10. | \$2,851.76 | = | \$2,851.76 |
| Incl frier | ate all other regular contributions to the expenses that you ude contributions from an unmarried partner, members of your hads or relatives. not include any amounts already included in lines 2-10 or amou | nousehold, your de | ependents, your roomr | | |
| Spe | cify: | | | 11. + | + \$0.00 |
| | d the amount in the last column of line 10 to the amount in e that amount on the Summary of Schedules and Statistical Sun | | | | \$2,851.76 |
| | | | | | Combined monthly income |
| 13. Do | you expect an increase or decrease within the year after y No. | ou file this form? | | | |
| | Yes. Explain: | | | | |
| | | | | | |

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| | | Docu | ment Page 35 of 6 | 9 | | |
|-----------------------------------|---|--|---|-------------------|--|------------|
| Fill in this infor | mation to identify | your case: | | | | |
| Debtor 1 | Gillian | | Brown-Myers | | | |
| Dobtor 0 | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filir | ng | |
| United States E | Bankruptcy Court for | or the: Northern [| District of Illinois (State) | | howing post-petition the following date: | chapter 13 |
| Case number (If known) | | | | MM / DD / YYYY | | |
| Official | Form 10 | <u>6J</u> | | | | |
| Schedul | e J: Your | Expenses | | | | 12/15 |
| information. If | | s possible. If two married people an leded, attach another sheet to this on. | | | | ber |
| Part 1: Des | cribe Your Hou | ısehold | | | | |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | o to line 2 | | | | | |
| | oes Debtor 2 live | in a separate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 r | must file Official Forms 106J-2, Expen | nses for Separate Household of Deb | tor 2. | | |
| 2. Do you hav | e dependents? | No | | | | |
| Do not list Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent with you? | live |
| | | | Child | 12 years | No. | |
| | | | Child | O veces | Yes. | |
| | | | Child | 9 years | Yes. | |
| expenses o | penses include f people other | ✓ No | | | | |
| than yourself an dependents | - | Yes | | | | |
| Part 2: Esti | mate Your Ong | joing Monthly Expenses | | | | |
| | of a date after the | our bankruptcy filing date unless y bankruptcy is filed. If this is a sup | | | | |
| | • | non-cash government assistance in under the contract of the co | - | | Your e | expenses |
| | I or home owners or the ground or lo | ship expenses for your residence. In t. 4. | clude first mortgage payments and | | 4. | \$815.00 |
| - | luded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

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Debtor 1 Gillian Brown-Myers Case number (if known)
First Name Middle Name Last Name

| FIIST Name MIQUIE Name Last Name | | |
|---|-----|---------------|
| | | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$325.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$179.00 |
| 6d. Other. Specify: Cell Phone | 6d | \$150.00 |
| 7. Food and housekeeping supplies | 7. | \$685.00 |
| 8. Childcare and children's education costs | 8. | \$216.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$24.00 |
| 10. Personal care products and services | 10. | \$15.00 |
| 11. Medical and dental expenses | 11. | \$20.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$100.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$87.50 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | 10 | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: Title loan | 17c | \$225.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make to support others who do not live with you. | | |
| Specify: | 19. | \$0.00 |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property | 00- | #0.00 |
| 20b. Real estate taxes. | 20a | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20b | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20c | \$0.00 |
| | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 | Gillian | | | Brown-Myers | Case number (if known) | | |
|----------|----------|------------------------|---------------------------|---|------------------------|-----|-------------|
| | First Na | ame | Middle Name | Last Name | | | |
| 21.Other | . Spec | ify: | | | | 21 | \$0.00 |
| 00 0-1 | | | | | | | |
| | | our monthly expens | ses. | | | | \$2,841.50 |
| | | es 4 through 21. | | | | | \$0.00 |
| | | ` . | ,, | from Official Form 106J-2 | | | \$2,841.50 |
| 22c. A | Add line | e 22a and 22b. The r | esult is your monthly exp | enses. | | 22. | |
| 23.Calcu | ılate y | our monthly net inc | ome. | | | | |
| 23a. (| Copy li | ne 12 (your combined | d monthly income) from S | Schedule I. | | 23a | \$2,851.76 |
| 23b. (| Сору у | our monthly expense | es from line 22 above. | | | 23b | \$2,841.50 |
| 23c. 8 | Subtrac | t your monthly exper | nses from your monthly in | icome. | | | \$10.26 |
| | The res | sult is your monthly n | et income. | | | 23c | |
| mort | | | | pan within the year or do you e nodification to the terms of you | | | |
| | | | | | | | |
| | | | | | | | |

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| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Gillian | | Brown-Myers |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois |
| | | _ | (State) |
| Case number (If known) | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | |
|-----|--|---|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? | |
| | ✓ No | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| | | | |
| | | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and | |
| × | /s/ Gillian Brown-Myers | × | |
| | Signature of Debtor 1 | Signature of Debtor 2 | |
| | Date 7/17/2017 | Date | |
| | MM/DD/YYYY | MM/DD/YYYY | |

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| | nis infori | mation to identify your o | case: | | | | | |
|--------------------|------------|-----------------------------|------------------------|--|---|---------------------------|----------|---|
| Debtor | | Gillian | | Brown-M | vers | | | |
| Dobtoi | • | First Name | Middle Na | | | | | |
| Debtor (Spouse, | | First Name | Middle Na | ame Last Nam | <u>e</u> | | | |
| United | States B | Sankruptcy Court for the: | Northern | District of Illino | is | | | |
| Case n | umber | | | (Stat | e) | | | |
| (If known) | | | | | | | | Chapk if this is |
| Offic | cial | Form 107 | | | | | | Check if this is amended filing |
| State | emei | nt of Financia | al Affairs fo | or Individuals | Filina for | Bankru | intev | 04/ |
| informa | ation. If | | ed, attach a sepa | rried people are filing rate sheet to this form | | | | |
| Part 1: | Give | Details About Your | Marital Status a | and Where You Lived | Before | | | |
| 1. V | Vhat is | your current marital st | atus? | | | | | |
| Г | Mar | rried | | | | | | |
| Ī | ✓ Not | married | | | | | | |
| 2. [| Ouring t | he last 3 years, have ye | ou lived anywhere | other than where you liv | ve now? | | | |
| | | | | | | | | |
| [[: | ✓ No | | - | • | | | | |
| [[| _ | . List all of the places yo | ou lived in the last | 3 years. Do not include v | | DW. | | |
| <u>[</u> | _ | . List all of the places yo | ou lived in the last | · | | DW. | | |
| [| Yes | . List all of the places yo | ou lived in the last : | · | | OW. | | Dates Debtor 2 lived there |
| [[| Yes | | ou lived in the last : | 3 years. Do not include v | where you live no | | | |
|] | Yes | | ou lived in the last : | 3 years. Do not include volume to the second | Where you live no | | | there Same as Debtor 1 |
|] | Yes | | ou lived in the last a | 3 years. Do not include to Dates Debtor 1 lived there | Where you live no | Debtor 1 | | there Same as Debtor 1 From |
|] | Yes | otor 1: | ou lived in the last : | 3 years. Do not include volume to the second | Debtor 2: | Debtor 1 | | there Same as Debtor 1 |
|] | Yes | ntor 1: | ou lived in the last : | 3 years. Do not include to Dates Debtor 1 lived there | Debtor 2: | Debtor 1 | Zip Code | there Same as Debtor 1 From |
|] | Yes Deb | ntor 1: | | 3 years. Do not include to Dates Debtor 1 lived there | Debtor 2: Same as Number Stree | Debtor 1 t State | Zip Code | there Same as Debtor 1 From |
|] | Yes Deb | nber Street State | | 3 years. Do not include to Dates Debtor 1 lived there | Debtor 2: Same as Number Stree City Same as | Debtor 1 t State Debtor 1 | Zip Code | there Same as Debtor 1 From To |
| | Yes Deb | ntor 1: | | 3 years. Do not include to Dates Debtor 1 lived there From To | Debtor 2: Same as Number Stree | Debtor 1 t State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
|] | Yes Deb | nber Street State | | 3 years. Do not include volume and there From To | Debtor 2: Same as Number Stree City Same as | Debtor 1 t State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From |

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$3700.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$20000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$16405.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions exclusions) and exclusions) Est. Link \$2,100.00 From January 1 of current year until Est. SSI \$9,870.00 the date you filed for bankruptcy: Est. Link \$4,800.00 For last calendar year: Est. SSI \$19,740.00 (January 1 to December 31, 2016 Est. Link \$4,800.00 For the calendar year before that: Est. SSI \$19,740.00 (January 1 to December 31, 2015

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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| Gillian | | | | wn-Myers | Case number | (if known) |
|-------------------------------------|--|--|---|---|--|--|
| First Na | ıme | Middle Name | Last | Name | | |
| iders inc poration ent, inclu | lude your relatives; a s of which you are a | any general partner an officer, director, ness you operate a | s; relatives of any g person in control, | jeneral partners; par or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| No | | | | | | |
| Yes. L | ist all payments to | an insider. | | | | |
| | | | Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| | | | payment | paiu | Still OWE | |
| Insider ¹ | s Name | | | | | |
| Numbe | r Street | | | | | |
| | | | | | | |
| City | State | Zip Code | | | | |
| | <u> </u> | <u> </u> | | | | |
| Insider' | s Name | | | | | |
| Numbe | er Street | | | | | |
| | | | | | | |
| City | State | Zip Code | | | | |
| Nithin 1 vo | or before you files | l for bonkruntou | did vou maka anv | novmente er tren | ofor any property o | n account of a debt that benefited an |
| nsider? | - | | | payments of trans | sici dily property o | in account of a dept that belieffed an |
| nclude pay | ments on debts gua | aranteed or cosigne | ed by an insider. | | | |
| √ No | | | | | | |
| Yes. L | ist all payments tha | at benefited an ins | sider. | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | paye | paid | J. 10 | Include creditor's name |
| | | | | | | |
| Insider' | s Name | | | | | |
| Numbe | r Street | | | | | |
| | | | | | | |
| City | State | Zip Code | | | | |
| - City | Otato | _ip 0000 | | | | |
| Insider ¹ | s Name | | | | | |
| Numbo | r Street | | | | | |
| Numbe | n Street | | | | | |
| | | | | | | |
| | | | | | | |

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Debtor 1 Gillian Brown-Myers Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

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| Debt | otor 1 Gillian | Brown-Myers | Case number (if known) | |
|------|--|--|--|------------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankrupto accounts or refuse to make a payment beca | | k or financial institution, set off any am | ounts from your |
| | ✓ No Yes. Fill in the details. | | | |
| | | Describe the action the o | reditor took Date action was taken | Amount |
| | Creditor's Name | | | - |
| | Number Street | | | |
| | | Last 4 digits of account nu | mber: XXXX- | |
| | City State Zip Code | 9 | | |
| 12. | Within 1 year before you filed for bankruptcy appointed receiver, a custodian, or another of | | ssession of an assignee for the benefit o | of creditors, a court- |
| | ✓ No ☐ Yes | | | |
| Part | List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankrupto | cy, did you give any gifts with a tota | al value of more than \$600 per person? | |
| | ✓ No ✓ Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$60 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | - |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | _ |
| | Number Street | | | |
| | City State Zip Code Person's relationship to you | 9 | | |
| | | | | |

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| Debtor 1 | | Brown-Myers | Case number (if known) | |
|----------|--|--|--|-----------------------|
| | First Name Middle Name | Last Name | | |
| 14. Wi | thin 2 years before you filed for bankruptcy | did you give any gifts or contribu | tions with a total value of more than \$60 | 10 to any charity? |
| _ | • • • | , and you give any gires of continue | tions with a total value of more than goo | o to any onanty. |
| ✓ | 4 | | | |
| | Yes. Fill in the details for each gift or contr | ibution. | | |
| | Gifts or contributions to charities | Describe what you contri | | Value |
| | that total more than \$600 | | contributed | |
| | | | | - ——— |
| | Charity's Name | | | |
| | | | | |
| | Number Street | | | |
| | | | | |
| | City State Zip Code | | | |
| | List Contain Losson | | | |
| Part 6: | List Certain Losses | | | |
| 1 | thin 1 year before you filed for bankruptcy | or since you filed for bankruptoy | lid you lose enything because of theft fir | a athar dispatar ar |
| | thin Tyear before you lifed for bankruptcy ombling? | or since you liled for bankruptcy, t | nd you lose anything because of their, if | e, other disaster, or |
| _ | T A1 | | | |
| | | | | |
| | Yes. Fill in the details. | | | |
| | Describe the property you lost and | Describe any insurance of | | |
| | how the loss occurred | Include the amount that in pending insurance claims of | | lost |
| | | A/B: Property. | William Go of Genedale | |
| | | | | |
| | List Certain Payments or Transfers | | | |
| | | | | |
| | out seeking bankruptcy or preparing a banl clude any attorneys, bankruptcy petition prepare No | | services required in your bankruptcy. | |
| ✓ | Yes. Fill in the details. | | | |
| | | Description and value of | any property Date paymen | t Amount of |
| | | transferred | or transfer | payment |
| | | | was made | |
| | Semrad Law Firm Person Who Was Paid | Attorney's Fee - 0.00 | 7/17/2017 | \$0.00 |
| | 10 N. Martingale Road | | | |
| | Number Street | | | |
| | Suite 400 | | | |
| | Schaumburg Illinois 60173 | | | |
| | City State Zip Code | | | |
| | | | | |
| | Email or website address | | | |
| | None Person Who Made the Payment, if Not You | | | |
| | | | | |
| | Person Who Was Paid | | | |
| | | | | |
| | Number Street | | | |
| | | | | |
| | | | | |
| | City State Zip Code | | | |
| | Email or website address | | | |
| | Email of Woboile address | | | |
| | Person Who Made the Payment, if Not You | | | |

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| Debt | tor 1 Gillian | | Brown-Myers | Case number (| if known) | |
|------|---|-----------------|--|----------------------|--|----------------------------------|
| | First Name M | iddle Name | Last Name | | | |
| 17. | Within 1 year before you filed for bar help you deal with your creditors or Do not include any payment or transfer | to make payme | ents to your creditors? | our behalf pay or tr | ansfer any property to a | nyone who promised to |
| | No No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | | Description and value of a transferred | ny property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | | | |
| | Number Street | | | | | |
| | City State | Zip Code | | | | |
| | the ordinary course of your business Include both outright transfers and transand transfers that you have already listed. No Yes. Fill in the details. | sfers made as s | ecurity (such as the granting of a | security interest or | mortgage on your propert | y). Do not include gifts |
| | | | Description and value of p transferred | | ibe any property or ents received or debts p hange | Date aid transfer was made |
| | Person Who Received Transfer | | | | | |
| | Number Street | | | | | |
| | City State Person's relationship to you | Zip Code | | | | |
| | Person Who Received Transfer | | | | | |
| | Number Street | | | | | |
| | City State Person's relationship to you | Zip Code | | | | |
| 19. | Within 10 years before you filed for beneficiary? (These are often called asset-protection | | you transfer any property to a | a self-settled trust | or similar device of whi | ch you are a |
| | ✓ No | , | | | | |
| | Yes. Fill in the details. | | | | | |
| | | | Description and value of | the property transf | erred | Date transfer was made |
| | Name of trust | | | | | |

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Debtor 1 Gillian Brown-Myers _ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City

City

State

Zip Code

State

Zip Code

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Debtor 1 Gillian Brown-Myers __ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt | | Gillian | | | Brown-Myers | Case n | iumber <i>(if l</i> | (nown) | | |
|------|-----------------------------|------------------------|----------------|--------------------|-----------------------------|--------------------------|---------------------|--------------|--------------------------------------|--------------------|
| | | First Name | | Middle Name | Last Name | _ | | | | _ |
| 26. | | e you been a part | y in any judio | cial or administra | ative proceeding under | any environmental | l law? Inc | lude settlem | ents and orde | rs. |
| | H | Yes. Fill in the det | aile | | | | | | | |
| | Ш | res. I III III ule dei | alls. | | _ | | | | | |
| | | | | | Court or agency | | Nature o | f the case | | Status of the case |
| | | Case title | | | | | | | | Case |
| | | Case title | | | | | | | | Pending |
| | | | | | Court Name | | | | | ш . |
| | | | | | No come le le co-Otore est | | | | | On appeal |
| | | Case number | | ı | NumberStreet | | | | | |
| | | | | ; | City State | Zip Code | | | | Concluded |
| | | | | , | Oily State | Zip Code | | | | |
| Part | 11: | Give Details Al | out Your E | Business or Co | nnections to Any Bu | ısiness | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | you own a business or | have any of the foll | lowing co | nnections to | any business | ? |
| | | A sole propri | etor or self-e | employed in a tra | de, profession, or othe | r activity, either full- | time or p | art-time | | |
| | | A member of | a limited liab | oility company (L | LC) or limited liability pa | artnership (LLP) | | | | |
| | | A partner in a | | | | | | | | |
| | | | - | | | | | | | |
| | | | | | e of a corporation | | | | | |
| | | An owner of | at least 5% o | of the voting or e | quity securities of a cor | poration | | | | |
| | | No None of the o | baya annlia | o Co to Dort 10 | | | | | | |
| | $\mathbf{\underline{\vee}}$ | No. None of the a | | | | | | | | |
| | Ш | Yes. Check all tha | at apply abo | ve and fill in the | details below for each b | ousiness. | | | | |
| | | | | | Describe the nati | ure of the business | | | lentification nu | |
| | | | | | | | | include Soc | ial Security nu | umber or ITIN. |
| | | D No | | | _ | | | EIN: | | |
| | | Business Name | | | | | | | | |
| | | Number Street | | | _ | | | Dates husin | ness existed | |
| | | Number Street | | | Name of account | ant or bookkeeper | | Dates Dusin | C33 CXISCU | |
| | | City | State | Zip Code | _ | ш от востатоврот | | F | т. | |
| | | Oity | Otate | Zip oode | | | | From | To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Danadha tha nat | | | Farada a la | | b Dt |
| | | | | | Describe the nati | ure of the business | | | lentification ทเ :ial Security ทเ | |
| | | | | | | | | | | |
| | | Business Name | | | _ | | | EIN: | | |
| | | | | | | | | | | |
| | | Number Street | | | | | | Dates busin | ess existed | |
| | | | | | Name of account | ant or bookkeeper | | | | |
| | | City | State | Zip Code | | | | From | То | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Describe the nati | ure of the business | | Employer Id | lentification nu | umber Do not |
| | | | | | | | | include Soc | ial Security nι | umber or ITIN. |
| | | | | | _ | | | EIN: | | |
| | | Business Name | | · | | | | | | |
| | | - | | | _ | | | | | |
| | | Number Street | | | | | | Dates busin | ess existed | |
| | | | | | Name of account | ant or bookkeeper | | | | |
| | | City | State | Zip Code | | | | From | To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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| Deb | tor 1 | Gillian | | | Brown-Myers | Case number (if known) |
|------|------------|---|--------------|------------------------|------------------------------|--|
| | | First Name | | Middle Name | Last Name | |
| 28. | | hin 2 years before ditors, or other pa No | | r bankruptcy, did you | give a financial statemen | nt to anyone about your business? Include all financial institutions, |
| | Ħ | Yes. Fill in the det | tails helow | | | |
| | | 100.1 11 10 00 | adilo bolow. | | | |
| | | | | | Date issued | |
| | | Name | | | MM/DD/YYYY | |
| | | Name | | | , 23, | |
| | | Number Street | | | | |
| | | | | | | |
| | | City | State | Zip Code | | |
| | | | | | | |
| Part | 12: | Sign Below | | | | |
| t | rue a | and correct. I unde | erstand that | t making a false state | ment, concealing propert | nts, and I declare under penalty of perjury that the answers are try, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /S/ | Gillian Brow | | | · · · · · · · · · · · · · · · · · · · |
| | | Signati | ure of Debto | r 1 | | Signature of Debtor 2 |
| | | Date 7 | 7/17/2017 | | | Date |
| | Did y | ou attach addition | nal pages to | Your Statement of Fi | nancial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| ı | √ N | lo | | | | |
| Ī | ∃ Y | 'es | | | | |
| [| Did y | ou pay or agree to | pay someo | ne who is not an atto | rney to help you fill out ba | ankruptcy forms? |
| Г | ✓ N | lo | | | | |
| i | = ' | es. Name of persor | n | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Gillian | | Brown-Myers |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number | | | |
| (If known) | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors I information below. | s Who Have Claims Secured by Property (Official Form 106D), fill in the | | | | |
|----|---|--|---|--|--|--|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | | |
| | Creditor's name: Speedy Cash - addison Description of property securing debt: Chrysler Sebring Value: \$2,325.00 | Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and | ☐ No. ✓ Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |

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| Debto | r Gillian | | Brown-Myers | Case number (if | |
|---------|--|-------------------------|----------------------------|--|----|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpired | Personal Property Leas | es | | |
| inform | ation below. Do not list r | | l leases are leases that a | Contracts and Unexpired Leases (Official Form 106G), fill in the tree still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2). | |
| De | escribe your unexpired pe | ersonal property leases | | Will the lease be assumed? | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Part 3: | Sign Below | | | | |
| | der penalty of perjury, I deperty that is subject to a | | my intention about any p | property of my estate that secures a debt and any personal | al |
| × | /s/ Gillian Brown-Myers | : | × | | |
| _ | Signature of Debtor 1 | | | nature of Debtor 2 | |
| [| Date 7/17/2017 MM/DD/YYYY | | Date | MM/DD/YYYY | |
| | | | | | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| | | Northern L | istrict of illinois | |
|-------|---|---------------------|---|--------------------------------------|
| In re | Gillian Brown-Myers | | Case No. | (If known) |
| | Debtor | | Chapter | (If known) Chapter 7 |
| | | | Опарты - | Onapter 7 |
| | DISCLOSURE OF CO | MPENSA' | TION OF ATTORNE | Y FOR DEBTOR |
| 1. | . Pursuant to 11 U.S.C. § 329(a) and Fed. compensation paid to me within one year rendered or to be rendered on behalf of the | before the filing o | of the petition in bankruptcy, or agr | eed to be paid to me, for services |
| | For legal services, I have agreed to accept | t | | \$1,425.00 |
| | Prior to the filing of this statement I have | received | | \$0.00 |
| | Balance Due | | | \$1,425.00 |
| 2. | . The source of the compensation paid to r | me was: | | |
| | Debtor | Other (sp | ecify) | |
| 3. | . The source of the compensation paid to r | me is: | | |
| | ✓ Debtor | Other (sp | ecify) | |
| 4. | I have not agreed to share the above- members and associates of my law fi | | nsation with any other person unle | ss they are |
| | I have agreed to share the above-disc members or associates of my law firm the people sharing in the compensat | n. A copy of the ag | | |
| 5. | . In return for the above-disclosed fee, I ha | ve agreed to rende | er legal service for all aspects of the | e bankruptcy case, including: |
| | a. Analysis of the debtor's financial bankruptcy; | situation, and rend | dering advice to the debtor in deter | mining whether to file a petition in |
| | b. Preparation and filing of any petit | ion, schedules, sta | atements of affairs and plan which | may be required; |
| | c. Representation of the debtor at the | e meeting of cred | tors and confirmation hearing, and | any adjourned hearings thereof; |
| 6. | . By agreement with the debtor(s), the above | ve-disclosed fee d | oes not include the following servi | ces: |
| | | | | |
| | | CER | TIFICATION | |
| | certify that the foregoing is a complete stator(s) in this bankruptcy proceedings. | atement of any agr | eement or arrangement for paymer | nt to me for representation of the |
| | 7/17/2017 | | /s/ Corey A. Walters | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |
| | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1 717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Brown-Myers, Gillian | Case No | |
|-----------------|---|---|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter7 |
| | VERIFICA | TION OF CREDITOR MAT | TRIX |
| Ti knowledge | he above named Debtors hereby verify the. | at the attached list of creditors is tr | rue and correct to the best of their |
| Date: | 7/17/2017 | /s/ Brown-Myers Brown-Myers, G Signature of Del | illian |

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

GO FINANCIAL Po Box 29018 Phoenix, AZ, 85038

US DEPT OF ED/GLELSI 2401 Internal Lane Attn: Chhengre Lim Madison, WI, 53704

Honor Finance PO Box 1817 Evanston, IL, 60204

UNIVERSITY OF PHOENIX 4615 E ELWOOD ST FL 3 PHOENIX, AZ, 85040

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

CAPITALONE PO BOX 26625 RICHMOND, VA, 23261

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

ARMOR SYSTEMS CO 1700 KIEFER DR STE 1 ZION, IL, 60099

Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

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Americash - Bankruptcy 880 Lee Street Suite 302 Des Plaines, IL, 60016

American Financial Choice 6 N Austin Blvd Oak Park, IL, 60302

CashNet USA Po Box 643990 Cincinnati, OH, 45264

White Hill Cash Pay day loans Island Finance, LLC. P.O. Box 330 Hays, MT, 59527

Peoples Gas Light & Coke Co. 200 E. Randolph St. Chicago, IL, 60601

IL Tollway PO Box 5544 Chicago, IL, 60608

CB/AVENUE PO BOX 182789 COLUMBUS, OH, 43218

Speedy Cash - addison 4800 W Addison St Chicago, IL, 60641

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| Debtor 1 Gillian | | Brown-Myers | Case number (if knowl | n) |
|---|---|---|--|--|
| Part 6: Answer These Que | Middle Name | Last Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts pring "incurred by an ind No. Go to line 1 Yes. Go to line 16b. Are your debts pring money for a busine No. Go to line 1 Yes. Go to line 1 | marily consumer debts? ividual primarily for a per 16b. 17. marily business debts? ass or investment or throu | sonal, family, or nouser Business debts are deb | ots that you incurred to obtain e business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. Tam filing under expenses are pair | that funds will be available | that after any exempt pro e to distribute to unsecure | |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5 ☐ 5,001-1 ☐ 10,001- | 0,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0,\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000 \$50,000 \$100,00 | 001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion \$500,000,001-\$1 billion |
| 20. How much do you estimate your liabilities to be? | \$0.\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000 \$50,000 | 001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below For you | orrect. If I have chosen to file ur of title 11, United States under Chapter 7. If no attorney represents out this document, I have I request relief in accorda | nder Chapter 7, I am awar Code. I understand the r me and I did not pay or a e obtained and read the r ance with the chapter of t | re that I may proceed, if relief available under ea agree to pay someone v notice required by 11 U title 11, United States C | the information provided is true and eligible, under Chapter 7, 11,12, or 13 ich chapter, and I choose to proceed who is not an attorney to help me fill s.C. § 342(b). Code, specified in this petition. In money or property by fraud in rimprisonment for up to 20 years, or |
| | both. 18 U.S.C. §§ 152, /s/ Gillian Brown-My Signature of Debtor 1 Executed on 7/1 | 1341, 1519, and 35/1. | Signature of Executed of | Um Brown Myus Debtor 2 |

JUBM.

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| Fill in this infor | mation to identify your c | ase: | | |
|---|--|----------------------------|--|--|
| Debtor 1 | Gillian | | Brown-Myers | _ |
| Debtor | First Name | Middle Name | Last Name | |
| Debtor 2 | | | Last Name | - |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | - |
| 0 | | | (State) | _ |
| Case number (If known) | | | | Check if this is an |
| | | | | amended filing |
| Official | Form 106De | <u>:C</u> | | |
| Deeleret | ion About an | Individual Deb | tor's Schedules | 12/15 |
| | | | | formation |
| If two married | people are filing togeth | er, both are equally respo | nsible for supplying correct in | ng a false statement, concealing property, or obtaining 50,000, or imprisonment for up to 20 years, or both. 18 |
| money or prop U.S.C. §§ 152, | erty by fraud in connect 1341, 1519, and 3571. n Below | ion with a pankruptcy ca | Se call fesuit ill lilles up to 02 | 50,000, or imprisonment for up to 20 years, or both. 18 |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | AND DESCRIPTION OF THE PROPERTY OF THE PROPERT | | (ACTIVITIES OF CONTROL | |
| Did you p | ay or agree to pay some | one who is NOT an attor | ney to help you fill out bankru | ptcy forms? |
| |) | | | |
| ✓ No Yes. | Name of person | | Attach Bankruptcy Peti Signature (Official Form | tion Preparer's Notice, Declaration, and n 119). |
| | | | | |
| Under pe | nalty of perjury, I declar | e that I have read the su | mmary and schedules filed wit | th this declaration and |
| that they | are true and correct. | | . H. D | ligh Blown Mylle |
| 🗶 /s/ Gillia | an Brown-Myers | | * JUL | Dahter? |
| Signature | of Debtor 1 | _ | Signature of | Debtor 2 |
| Date 7/1 | 7/2017 M/DD/YYYY | | Date MM/I | DD/YYY |

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| Debtor 1 | Gillian | | | Brown-Myers | Case number (if known) |
|--------------------------|---------------------------------------|---|--|---|--|
| Jebtor i | First Name | | Middle Name | Last Name | A CONTRACTOR OF THE CONTRACTOR |
| 8. Wit | titors, or other (| re you filed for l parties. | oankruptcy, did yc | u give a financial stateme | ent to anyone about your business? Include all financial institutions |
| | No / Yes. Fill in the o | letails below. | | Date issued | |
| | Name | | | MM/DD/YYYY | |
| | Number Stree | t | | _ | |
| | City | State | Zip Code | | |
| l hav true : a bar | and correct. I ur nkruptcy case ca | nderstand that r an result in fine /s/ Gillian Brown- | making a false sta s up to \$250,000, -Myers | of Affairs and any attachm tement, concealing prope or imprisonment for up to | sents, and I declare under penalty of perjury that the answers are unity, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Sign | ature of Debtor | | | / |
| | | e 7/17/2017 | | | Date |
| Did y | ou attach additi | ional pages to Y | our Statement of | Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| | No Yes | | | | |
| Did y | ou pay or agree | to pay someon | e who is not an at | torney to help you fill out | bankruptcy forms? |
| lacksquare | No Yes. Name of per | son | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| or Gillian | Middle Name | Brown-Myers Last Name | Case number (if |
|--|--|--|---|
| First Name | | | , |
| List Your Unexpired F | Personal Property Leas | ses | to the and Heaverred Losses (Official Form 106G) fill in the |
| ny unexpired personal propo nation below. Do not list rea ne an unexpired personal p | al actata leases. Unexbirei | n leases are reases that ar | contracts and Unexpired Leases (Official Form 106G), fill in the e still in effect; the lease period has not yet ended. You may S.C. § 365(p)(2). |
| escribe your unexpired per | sonal property leases | | Will the lease be assumed? |
| _essor's name: | | | No Yes |
| Description of leased property: | | | |
| Lessor's name: | | | No Yes |
| Description of leased property: | | | |
| Lessor's name: | | | No Yes |
| Description of leased property: | | | |
| Lessor's name: | | | No Yes |
| Description of leased property: | | | |
| Lessor's name: | | | No Yes |
| Description of leased property: | | | |
| Lessor's name: | | | No Yes |
| Description of leased property: | • | | |
| Lessor's name: | | | No Yes |
| Description of leased property: | | | |
| 3: Sign Below | | Approximation of the second of | |
| nder penalty of perjury, I dec roperty that is subject to an | clare that I have indicated unexpired lease. | I my intention about any p | roperty of my estate that secures a debt and any personal |
| | | * | Whan Blown Myers |
| Signature of Debtor 1 | | Signa | ature of Debtor 2 |
| Date 7/17/2017 MM/DD/YYYY | | Date | MM/DD/YYYY |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Brown-Myers, Gillan | Case No | | _ |
|---------|---|---|--------------------------------------|------------|
| | Debtor(s) | | | |
| | | Chapter | Chapter7 | _ |
| | VERIFICA | ATION OF CREDITOR MA | TRIX | |
| knowled | The above named Debtors hereby verify t | hat the attached list of creditors is t | rue and correct to the best of their | |
| Date: | 7/17/2017 | /s/ Brown-Myer Brown-Myers, (Signature of De | | MMYLL - |

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| Debtor 1 Gillian | Adid die Manne | Brown-Myers Last Name | Case number (if known | | <u> </u> |
|--|--|--|--|--|---------------------------------|
| First Name | Middle Name | Last Name | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 8. Unemployment compensation Do not enter the amount if you con under the Social Security Act. Instead | ad, list it here: | · · · · · · · ·) | \$0.00 | | |
| For you For your spouse | , <u> </u> |).645.00).00 | | | |
| Pension or retirement income. D benefit under the Social Security Ac | o not include any amount it. | received that was a | \$0.00 | | |
| 10.Income from all other sources r amount, Do not include any benefit payments received as a victim of a v international or domestic terrorism. page and put the total below. | not listed above. Specify the transfer of the specific transfer of the specific and the specific and the specific transfer of t | numanity, or | | | |
| Other Government Assistance | | | \$345.67 | | |
| Total amounts from separate pages | s, if any. | | +\$0.00 | | 1 / |
| 11. Calculate your total current me | | 2 through 10 for | \$868.89 | | \$868.89 |
| each column. Then add the total for C | | | | | |
| | | | | | Total current monthly income |
| art 2: Determine Whether the | Moone Test Annlies t | to You | | | |
| 2. Calculate your current monthly | | | | | |
| 12a. Copy your total current month | ly income from line 11. | | Copy li | ne 11 here → | \$868.89 |
| Multiply by 12 (the number of | | | | | X 12 |
| 12b. The result is your annual incom | me for this part of the form | | | /12b. | \$10,426.68 |
| 12B. The local to your annual | · | | | 1 | / |
| | | | | | |
| Calculate the median family inco | ome that applies to you. | Follow these steps: | | (| |
| | ome that applies to you. | Follow these steps: | | | |
| Fill in the state in which you live. | | | | | |
| Fill in the state in which you live. Fill in the number of people in your | household. | (Ilinois | | 13 | 070,400,00 |
| Fill in the state in which you live. Fill in the number of people in your Fill in the median family income for | household. | (Ilinois | and the second second second second second second | 13. | \$76,406.00 |
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| Fill in the state in which you live. Fill in the number of people in your Fill in the median family income for household. To find a list of applicable median is instructions for this form. This list in the state of the state | r household. Tyour state and size of encome amounts, go online may also be available at the equal to line 13. On the top | Illinois 3 using the link specified bankruptcy clerk's office of page 1, check box 1 | There is no presumption of a | buse. | \$76,406.00 |
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| Fill in the state in which you live. Fill in the number of people in your Fill in the median family income for household. To find a list of applicable median in instructions for this form. This list in 4. How do the lines compare? 14a. Line 12b is less than or e Go to Part 3. 14b. Line 12b is more than line Go to Part 3 and fill out Forms. | r household. Tyour state and size of moome amounts, go online may also be available at the qual to line 13. On the top e 13. On the top of page 1 form 122A-2. | Illinois 3 using the link specified bankruptcy clerk's office of page 1, check box 1, check box 2, The pres | There is no presumption of a umption of abuse is determine the standard of abuse is determined to the standard in any attachments is | buse. ed by Form 122A-2. true and correct. | |
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B2030 (Form 2030) (12/15)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| | Gillian Brown-Myers | | Case No. | (If Impure) |
|---|---|---|--|----------------------------------|
| | Debtor | | _, , | (If known) |
| | | | Chapter | Chapter 7 |
| D | ISCLOSURE OF C | COMPENSATION OF | F ATTORNEY F | OR DEBTOR |
| . Pursua comper rendere | int to 11 U.S.C. § 329(a) and Fe nsation paid to me within one y ed or to be rendered on behalf o | ed. Bankr. P. 2016(b), I certify that I rear before the filing of the petition of the debtor(s) in contemplation of | am the attorney for the ab in bankruptcy, or agreed t or in connection w ith the | bankruptcy case is as follows: |
| For lega | al services, I have agreed to acc | ept | | \$1,425.0 |
| Prior to the filing of this statement I have received | | | \$0.0 | |
| Balance | e Due | | | \$1,425.0 |
| . The so | urce of the compensation paid | to me was: | | |
| | ✓ Debtor | Other (specify) | | j |
| . The so | urce of the compensation paid | to me is: | | |
| | Debtor | Other (specify) | | |
| . Iha | ave not agreed to share the abo embers and associates of my la | ove-disclosed compensation with a w firm. | ny other person unless the | ey are |
| — I me | ave agreed to share the above-opmbers or associates of my law a people sharing in the compen | disclosed compensation with a other firm. A copy of the agreement, togo sation, is attached. | er person or persons who ether with a list of the nam | are not les of |
| . In retur | rn for the above-disclosed fee, l | have agreed to render legal service | e for all aspects of the ban | kruptcy case, including: |
| a. | Analysis of the debtor's finance bankruptcy; | ial situation, and rendering advice | to the debtor in determinir | ng whether to file a petition in |
| b. | Preparation and filing of any p | etition, schedules, statements of af | ffairs and plan which may | be required; |
| c | Representation of the debtor a | t the meeting of creditors and conf | irmation hearing, and any | adjourned hearings thereof; |
| | | bove-disclosed fee does not includ | | |
| | | | | |
| | | CERTIFICATION | | |
| I certify t tor(s) in t | that the foregoing is a complete this bankruptcy proceedings. | statement of any agreement or arr | angement for payment to | me for representation of the |
| | 7/17/2017 | | /s/ Corey A. Walters | |
| | Date | | Signature of Attomey | |
| | | | Semrad Law Firm | |
| | _ | | Name of law firm | |

MM

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC 1425.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either.

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings. Debtor Initials

475298

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I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed.

I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: JULY 17 2017

GILLIAN BRØWN-MYERS

Corev A. Walters

Attorney